

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | B H      | 60245  | 12-17-98 |
| O.I.P.E. CLASSIFIER |          | 2      | 12/25/98 |
| FORMALITY REVIEW    |          | 60000  | 1/13/99  |

## INDEX OF CLAIMS

BEST AVAILABLE COPY

Rejected  
Allowed  
Cancelled  
Restricted

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Interference  
Appeal  
Objected

(Through numeral)...

| Claim | Date     |
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If more than 150 claims or 10 actions  
staple additional sheet here

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